

Alberta Forest Products Association

Documentation and Interview   
Health and Safety Audit Report

Prepared for:

Prepared by:

Audit Date(s):

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#### Executive Summary

#### Description of Activities

#### Standard Audit Summary

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Auditor Information** | | | | | | |
| **Lead Auditor**: |  | | AFPA Certified  Auditor Qualification | | | |
| **Audit Team**: |  | | AFPA Certified  Auditor Qualification | | | |
|  |  | | AFPA Certified  Auditor Qualification | | | |
|  |  | | AFPA Certified  Auditor Qualification | | | |
| **Company**: | | | | | | |
| **Address**: | | | | | | |
| **City**: | | **Province**: | | | | **P/C**: |
| **Phone**: | | **Fax**: | | | | **E-mail**: |
|  | | | | | | |
| **Company Information** | | | | | | |
| **Legal** **Name**: | | | | | | |
| **Address**: | | | | | | |
| **City**: | | **Province**: | | **P/C**: | | |
| **Key** **Contact**: | | | | **Telephone**: | | |
| **E-mail:** | | | | **Total # of workers**: | | |
|  | | | | | | |
| **Audit Information** | | | | | | |
| **Audit Start Date:** | | **WCB Account(s) #**: | | | **WCB Industry Code(s) included in Audit Scope:** | |
| **Audit End Date:** | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Audit Sampling Details by Site and Level | | | | | | | | | | | | | | |
| Site(s)  (List each active work site below and provide interview details specific to each site included in the scope of the audit to the right) | Included in Scope  (indicate yes or no) | Total Employees  (list for each site) | | | | | Interviews Conducted  (list for each site) | | | | | | Notes (if applicable) | |
| Senior Manager(s) | Manager(s) | Supervisor(s) | Worker(s) | Total Employees | Senior Manager(s) | Manager(s) | Supervisor(s) | Workers (in person) | Workers (questionnaire) | Total. Interviewed |  |
| 1. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **TOTALS** |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Audit Sampling Details by Department | | | | | | | | | | | | | | | |
| **By Department**  List departments below, and indicate sampling numbers (right). Adjust categories to reflect organizational structure (if needed). | **Total Dept.** | **Full Time** | | **Part Time** | | **Casual** | | **Shift 1** | | **Shift 2** | | **Shift 3** | | **Shift 4** | |
| Total | Interviewed | Total | Interviewed | Total | Interviewed | Total | Interviewed | Total | Interviewed | Total | Interviewed | Total | Interviewed |
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| **TOTALS** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Interviews** | **Total** | **Interviews Conducted** |
| Employers and self-employed persons |  |  |
| Visitors |  |  |

|  |  |
| --- | --- |
| Pre-audit letter | Pre-audit meeting by phone/online |
| Documentation review | Post-audit meeting by phone/online |
| Draft audit protocol and report forwarded to AFPA | |

#### Standard Audit Summary Element Scores

Evaluation of: (Company Name)

Date(s) of Audit:

Audited by: (Print and Sign):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Element** | Points Possible | **Possible – N/A** | **Points Awarded** | **Percent**  **Total** |
| 1. Leadership Commitment | 80 |  |  |  |
| 1. Hazard Assessment | **162** |  |  |  |
| 1. Hazard Control | **120** |  |  |  |
| 1. Qualifications, Orientation and Training | **115** |  |  |  |
| 1. Work Site and Other Parties  (at or in the vicinity of the work site) | **75** |  |  |  |
| 1. Regular Inspection and Monitoring | **90** |  |  |  |
| 1. Emergency Response | **100** |  |  |  |
| 1. Incident Investigation | **130** |  |  |  |
| 1. Joint Work Site Health and Safety Committee(s) and Health and Safety Representative(s) | **105** |  |  |  |
| 1. System Review | **115** |  |  |  |
| **TOTAL** | **1092** |  |  |  |

NOTE: For certification purposes, an overall score of 80% is required. For COR maintenance purposes, an overall minimum score of 60% is required.

#### 1. Leadership Commitment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 1. Strengths:**

**Suggestions for Improvement:**

#### 2. Hazard Assessment

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 2. Strengths:**

**Suggestions for Improvement:**

#### 3. Hazard Control

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 3. Strengths:**

**Suggestions for Improvement:**

#### 4. Qualifications, Orientation and Training

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 4. Strengths:**

**Suggestions for Improvement:**

#### 5. Work Site and Other Parties (at or in the Vicinity of the Work Site)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 5. Strengths:**

**Suggestions for Improvement:**

#### 6. Regular Inspection and Monitoring

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 6. Strengths:**

**Suggestions for Improvement:**

#### 7. Emergency Response

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 7. Strengths:**

**Suggestions for Improvement:**

#### 8. Incident Investigation

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 8. Strengths:**

**Suggestions for Improvement:**

#### 9. Joint Work Site Health and Safety Committee(s) (HSC) and Health and Safety Representative(s) (HSR)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 9. Strengths:**

**Suggestions for Improvement:**

#### 10. System Review

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Element Score: | % | Points Possible: |  | Points Awarded: |  |

**Element 10. Strengths:**

**Suggestions for Improvement:**

#### Work Site Observations

**Work Site Observation Strengths:**

**Suggestions for Improvement:**